Program B: Prevention and Treatment

Program Authorization: Act 353 of 1952; Acts 33 & 121 of 1958; Act 786 of 1978; Act 20 of 1979; Act 899 of 1984; Act 1 of First Extraordinary Session of 1988; and Act 159 of 1989

PROGRAM DESCRIPTION

The mission of the Prevention and Treatment Program is to enhance, provide and ensure the highest quality of treatment and prevention services for alcohol, drug abuse and other addictive disorders, such as gambling, to the citizens of Louisiana. Primary to this mission is the delivery of alcohol and drug treatment and prevention services that are responsive to the needs of individuals and communities affected by the addiction problem in Louisiana.

The goals of the Prevention and Treatment Program are:

- 1. To provide the highest quality alcohol and drug abuse and gambling treatment that is responsive to the client's needs, clinically effective, and delivered in the most efficient manner.
- 2. To o assist in the development and provision of science based prevention programs that support a comprehensive prevention system, throughout the state to reduce the use and abuse of alcohol, tobacco and other drugs.

Major activities of this program include Primary Prevention, Detoxification Services, Primary Inpatient, Community-Based, Residential, Outpatient, Drug Court, and Compulsive Gambling.

OBJECTIVES AND PERFORMANCE INDICATORS

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2001-2002. Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicator values are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year (the fiscal year of the budget document).

1. (KEY) To admit 3,041 individuals to Detox and have an average daily census of 75.

Strategic Link: This objective is identical to Goal I, Objective I.1 of the revised Strategic Plan.

L			PERF	ORMANCE INDIC	CATOR VALUES		
Е		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
Е		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
S	Average daily census	66	76	58	58	75	75 ⁵
K	Total number of admissions	3,462	3,437	3,158	3,158	3,041	3,041 5
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ¹	Not available ²	Not applicable ³	50%	50%	50% 5
K	Cost per client day (Social Detox)	Not applicable ¹	\$35	\$35	\$35	\$35	\$35 ⁵
K	Cost per client day (Medically Supported)	Not applicable ¹	\$105	\$103	\$103	\$103	\$103 ⁵
K	Recidivism rate 4	25%	31%	45% 4	45%	38%	38% 5

¹ This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

² This is a new performance indicator for FY 2001-2002 and no prior year data are available.

³ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

⁴ High recidivism rates are expected in detox programs. Recidivism rate is calculated by computing the number of readmissions divided by the number of admissions.

⁵ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

GENERAL PERFORMANCE INFORMATION:										
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR					
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL					
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00					
Number of beds	Not available ¹	Not available ¹	87	83	84					
Average length of stay in days	Not available ¹	Not available ¹	7	7	9					
Percentage of positive responses on client	Not available ²	Not available ²	95%	95%	96%					
satisfaction questionnaire										
Occupancy rate	Not available ¹	Not available ¹	86%	84%	90%					
Number of persons needing detoxification	Not available ¹	Not available ¹	67,200	67,200	67,200 ³					
treatment										
Percentage of clients completing treatment	Not available ¹	76%	70%	70%	77%					
program										

No scientific data are available at this time. In prior years, detox was included in a category called "short term" which included inpatient adult and adolescent.
 No scientific data are available at this

time.

The Office of Addictive Disorders (OAD) is in the process of securing new national data to update this figure.

2. (KEY) To admit 4,851 individuals to Primary Inpatient programs and have an average daily census of 333.

Strategic Link: This objective is identical to Goal I, Objective I.2 in the revised Strategic Plan.

Children's Cabinet Link: It relates to Adolescent Inpatient Programs at a total cost of \$2,171,200.

Explanatory Note: This objective and performance indicators combines the adult and adolescent inpatient programs.

L			Pl	ERFORMANCE IN	DICATOR VALU	ES	
E		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
Е		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
K	Total number of admissions	4,607 1	5,551 ²	5,004 ³	4,609	4,851 4	4,851 13
S	Average daily census	336 ⁵	370 ⁶	359 ⁷	333	333 4	333 13
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ⁸	Not available 9	Not applicable ¹⁰	50%	50%	50% 13
K	Cost per client day (adult)	\$94	\$83	\$99	\$99	\$83	\$83 ¹³
K	Cost per client day (adolescent)	\$141	\$109	\$115	\$115	\$110	\$110 ¹³
K	Recidivism rate	Not applicable 8	14%	Not applicable 12	14% 12	14% 4	14% 13

¹ This performance standard is based upon the combined adult and adolescent admissions. In FY 1999-2000, these performance indicators appeared separately. The standard for adult admissions was 4,244 and the standard for adolescent admissions was 363.

² This prior year actual is based upon the combined adult and adolescent admissions. In FY 1999-2000, these performance indicators appeared separately. The prior year actual for adult admissions was 5,112 and the prior year actual for adolescent admissions was 439.

³ This performance standard is based upon the combined adult and adolescent admissions. In FY 2000-2001, these performance indicators appeared separately. The performance standard for adult admissions was 4,641 and the standard for adolescent admissions was 363.

⁴ This standard is based upon a combined total for adult and adolescent primary inpatient services.

⁵ This performance standard is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The performance standard for adult average daily census was 291 and the standard for adolescent average daily census was 45.

⁶ This prior year actual is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The prior year actual for adult average daily census was 317 and the prior year actual for adolescent average daily census was 53.

⁷ This performance standard is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The performance standard for adult average daily census was 291 and the standard for adolescent average daily census was 45.

GEN	GENERAL PERFORMANCE INFORMATION:										
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR						
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL						
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00						
Number of beds (adult)	Not available ¹	Not available ¹	335	327	327						
Number of beds (adolescent)	Not available ¹	Not available ¹	26	56	56						
Average length of stay in days (adult)	Not available ¹	Not available ¹	24	24	23						
Average length of stay in days (adolescent)	Not available ¹	Not available ¹	54	56	51						
Percentage of positive responses on client	Not available ¹	Not available ¹	95%	96%	93%						
satisfaction questionnaire											
Total number of admissions	3,365 ²	4,780	5,023	4,956							
					5,551						
Occupancy rate (adult)	Not available ¹	Not available ¹	98%	94%	94%						
Occupancy rate (adolescent)	Not available ¹	Not available ¹	98%	83%	87%						
Percentage of clients completing treatment	Not available ¹	64%	65%	72%	66%						
program											

¹ No scientific data available for this time period. In prior years, figures were captured in a category called "short term," which include both adult and adolescent treatment programs. Prior to FY 1998, Capital Area programs were also included in these figures.

² These figures include Capital Area Human Services District (schedule 09-302).

⁸ This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

⁹ This is a new performance indicator. No actual yearend data was collected for FY 1999-2000.

¹⁰ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

¹¹ Recidivism rate is achieved by calculating the number of readmissions for adult and adolescent inpatient programs, divided by the sum of admissions for adults and adolescent inpatient programs.

¹² The performance standard for FY 2000-2001 was 19% for adults and 5% for adolescents. The performance standard of 14% represents a combined total for both adults and adolescents.

¹³ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

3. (KEY) To admit 986 individuals to Community Based programs and have an average daily census of 238.

Strategic Link: This objective is identical to Goal I, Objective I.3 of the revised Strategic Plan.

Children's Cabinet Link: It relates to Adolescent Community Based Programs at a total cost of \$982,435.

Explanatory Note: This objective and performance indicators combines the adult and adolescent inpatient programs.

L			PERI	FORMANCE INDI	CATOR VALUES		
E		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
E		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
K	Total number of admissions	1,661 ¹	1,133 ²	940 ³	9404	986	986 ¹²
S	Average daily census	247 ⁵	258 ⁶	216 7	2164	238	238 12
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ⁸	Not available 9	Not applicable ¹⁰	50%	50%	50% 12
K	Cost per day (adult)	\$31	\$27	\$31	\$31	\$31	\$31 12
K	Cost per day (adolescent)	\$65	\$70	\$68	\$68	\$68	\$68 ¹²
K	Recidivism rate	Not applicable 8	8%	Not applicable 10	7% 4	7%	7% ¹²

¹ This performance standard is based upon the combined adult and adolescent admissions. In FY 1999-2000, these performance indicators appeared separately. The standard for adult admissions was 1,555 and the standard for adolescent admissions was 106.

² This prior year actual is based upon the combined adult and adolescent admissions. In FY 1999-2000, these performance indicators appeared separately. The prior year actual for adult admissions was 998 and the prior year actual for adolescent admissions was 135.

³ This performance standard is based upon the combined adult and adolescent admissions. In FY 2000-2001, these performance indicators appeared separately. The performance standard for adult admissions was 824 and the standard for adolescent admissions was 116.

⁴ This standard is based upon a combined total for adult and adolescent primary inpatient services.

⁵ This performance standard is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The performance standard for adult average daily census was 212 and the standard for adolescent average daily census was 35.

⁶ This prior year actual is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The prior year actual for adult average daily census was 224 and the prior year actual for adolescent average daily census was 34.

⁷ This performance standard is based upon the combined adult and adolescent average daily census. In FY 1999-2000, these performance indicators appeared separately. The performance standard for adult average daily census was 184 and the standard for adolescent average daily census was 216.

GENI	GENERAL PERFORMANCE INFORMATION:										
	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL						
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00						
Number of beds (adult)	Not available ¹	Not available ¹	223	230	230						
Number of beds (adolescent)	Not available ¹	Not available ¹	39	40	40						
Average length of stay in days (adult)	Not available ¹	Not available ¹	73	78	87						
Average length of stay in days (adolescent)	Not available ¹	Not available ¹	Not available ²	90 3	95 ³						
Occupancy rate (adult)	Not available ¹	Not available ¹	73%	92%	97%						
Occupancy rate (adolescent)	Not available ¹	Not available ¹	97%	89%	85%						
Percentage of positive responses on client satisfaction questionnaire	Not available ¹	Not available ¹	Not available ⁴	83%	81%						
Percentage of clients completing treatment program	Not available ¹	26%	28%	23%	30%						

¹ No data available at this time. In prior years, data was captured in a program called "Long Term" which included both adult and adolescent programs and Capital Area Human Services District (schedule 09-302).

⁸ This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

⁹ This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

¹⁰ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

¹¹ Recidivism rate is achieved by calculating total number of readmissions for adult and adolescent inpatient programs, divided by the sum of admissions for adults and adolescent inpatient programs.

¹² Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

² No data was available for this time period.

³ The indicator's value is greater for adolescents than adults, and it may show significant fluctuations due to adolescent needs and parental intervention.

⁴ Management Information System for Alcohol and Drug Abuse (MISADA) was not collecting this data at that time.

4. (KEY) To admit 10,935 individuals in Outpatient programs and provide 272,724 services.

Strategic Link: This objective is identical to Goal I, Objective I.4, in the revised Strategic Plan.

L			PERF	ORMANCE INDIC	CATOR VALUES		
Е		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
Е		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
K	Total number of admissions	12,521	14,060	12,000	10,935 1	10,935	10,935 6
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ²	Not available ³	Not applicable ⁴	50%	50%	50% ⁶
K	Cost per service provided	Not applicable ²	\$34	Not applicable 4	\$51	\$51	\$51 ⁶
S	Number of services provided	Not applicable ²	344,318	300,000	272,724 1	272,724	272,724 6
K	Recidivism rate 5	19%	22%	25%	25%	25%	25% ⁶

¹ Due to a reduction in the appropriated budget H.J. "Blue" Walters program was closed.

² This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

³ This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

⁴ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

⁵ Recidivism rate: the number of readmissions divided by the number of admissions.

⁶ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

GENERAL PERFORMANCE INFORMATION:									
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR				
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL				
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00				
Percentage of positive responses on client	Not available ¹	Not available ¹	95%	96%	96%				
satisfaction questionnaire									
Number of persons needing outpatient	Not available ¹	Not available ¹	168,000 ²	168,000 ²	168,000 ³				
treatment adult treatment									
Number of admissions	16,713 ⁴	12,234	13,493	14,296	14,060				

No scientific data available at that time.
 Date source 1996 La Adult Household Survey. OAD is currently researching this indicator to update this figure.
 OAD is in the process of securing new national data to update

this figure.

4 This data includes Capital Area Human Services District.

5. (KEY) To admit 1,621 individuals to its Drug Court programs and have a 1% recidivism rate.

Strategic Link: This objective is identical to Goal I. Objective I.5 found in the revised Strategic Plan.

Children's Cabinet Link: It relates to Juvenile Drug Court programs at a total cost of \$1,197,718.

Explanatory Note: Performance indicators data include Capitol Area Human Service District (09-302) and Jefferson Parish Area Human Services Authority (09-300).

L			PE	RFORMANCE IN	DICATOR VALUE	ES	
Е		YEA REND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
Е		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
K	Total number of admissions	1,447	1,898	1,621	1,621	1,621 1	1,621 8
K	Annual cost per treatment slot (juvenile)	Not applicable ²	\$2,700 ³	\$3,600	\$3,600	\$5,000 4	\$5,000 8
K	Annual cost per treatment slot (adult)	\$2,500 ³	\$2,700 ³	\$2,500	\$2,500	\$3,600 4	\$3,600 8
K	Percentage of clients showing marginal to significant	Not applicable ²	Not available ⁵	Not applicable ⁶	50%	50%	50% 8
	improvement following treatment services						
K	Recidivism rate 7	20%	1%	10%	10%	1%	1% 8

¹ OAD is moving towards an automated system that should increase the validity of future reporting by next fiscal year. Currently, this data is gathered through manual reporting.

² This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

³ This includes adult and juvenile court costs together. More than one client can occupy a treatment slot during the reporting period. The actual cost of serving a client for twelve (12) months, may be lower than the cost per treatment slot because of retention rate (39% of clients may leave prior to program completion).

⁴ This is the average cost per treatment slot, which includes a combination of Federal and State funds. This cost also reflects both additional court costs and actual treatment costs. Some courts are not at capacity. Estimated cost varies as courts reach capacity.

⁵ This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

⁶ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

⁷ Recidivism rate: the number of readmissions divided by the number of admissions.

⁸ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

GENERAL PERFORMANCE INFORMATION:									
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR				
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL				
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00				
Number of treatment slots (juvenile)	Not available ¹	Not available ¹	Not available ¹	Not available ²	Not available				
Number of treatment slots (adult)	Not available ¹	Not available ¹	237 ²	900 ²	1,779 ³				
OAD annual cost per active case (juvenile) 4	Not available ⁵	Not available ⁵	Not available ⁵	\$3,360	\$3,360 ⁶				
OAD annual cost per active case (adult) 4	Not available ⁵	Not available ⁵	Not available ⁵	\$1,563	\$1,563 ⁶				
Number of admissions	Not available ¹	Not available ¹	499	1,008	1,898				

¹ Program did not exist until December

<sup>1998.
&</sup>lt;sup>2</sup> This indicator was previously incorporated with the adult drug court.

This figure represents a combined total of juvenile and adults. The number differs from that reported in LaPAS. The LaPAS figure is1,214.
 OAD annual cost per active case is calculated by dividing the OAD drug court funding by number of active cases by

type adult and juvenile.

This is a new indicator which did not appear

in Act 11.

⁶ Additional costs for treatment provided by OAD exceed drug court provider's contracts when a more intensive setting for treatment is required.

6. (KEY) To admit 450 individuals to Compulsive Gambling Outpatient treatment programs and provide 38,000 services.

Strategic Link: This objective is identical to Goal I, Objective I.6 in the revised Strategic Plan.

Explanatory Note: These figures include data for Capital Area Human Services District (09-302) and Jefferson Parish Human Services Authority (09-300).

L		PERFORMANCE INDICATOR VALUES						
Е		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT	
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED	
E		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL	
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002	
K	Total number of admissions	450	451	587	587	450	450 ⁶	
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ¹	Not available ²	Not applicable ³	50% 4	50%	50% 6	
K	Cost per service provided	\$21	\$7	\$13	\$13	\$11	\$11 ⁶	
S	Number of services provided	18,840	38,437	23,675	23,675	38,000	38,000 ⁶	
K	Recidivism rate 5	19%	10%	25%	25%	25%	25% 6	

¹ This performance indicator did not appear under Act 10 of 1999 or Act 11 of 2000 and therefore has no performance standards for FY 1999-2000 and FY 2000-2001.

² This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

³ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standards for FY 2000-2001.

⁴ The value shown for existing performance standard is an estimate of yearend performance, not a performance standard.

⁵ Recidivism rate is calculated by the number of readmissions divided by the number of admissions.

⁶ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

GENERAL PERFORMANCE INFORMATION:								
PRIOR YEAR ACTUAL ACTUAL ACTUAL ACTUAL ACTUAL PERFORMANCE INDICATOR PRIOR YEAR ACTUAL FY 1995-96 FY 1996-97 FY 1997-98 FY 1998-99 FY 1999								
Percentage of positive responses on client satisfaction questionnaire	Not available ¹	Not available ¹	Not available ¹	97%	96%			
Number of persons needing treatment for compulsive gambling Not available 1 53,000 2 53,000 2 53,000 2 53								

¹ No scientific data was available at this time.

7. (KEY) To admit 177 individuals to Compulsive Gambling Inpatient treatment programs and have an average daily census of fourteen.

Strategic Link: This objective is identical to Goal I. Objective 1.7, found in the revised Strategic Plan.

L			PERF	ORMANCE INDI	CATOR VALUES		
E		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
E		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
S	Average daily census	16	14	14	14	14	14 6
K	Total number of admissions	225	189	150	150	177	177 ⁶
	Percentage of clients showing marginal to significant improvement following treatment services	Not applicable ¹	Not available ²	Not applicable ³	50% 4	50%	50% 6
K	Cost per client day (adult)	\$75	\$75	\$75	\$75	\$75	\$75 ⁶
K	Recidivism rate 5	19%	2%	10%	10%	10%	10% 6

¹ This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standards for FY 1999-2000.

² The Prevalence of Pathological Gambling in Louisiana (Based on the 1995 Volberg Study), James Wastphal, M.D., Dept of Psychiatry, LSU Medical Center - Shreveport, La and Jill Rush, M.D., Dr. PH Department of Psychiatry, LSU Medical Center - Shreveport.

³ OAD is trying to secure funding to conduct a new gambling needs assessment to update current figures.

² This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

³ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standards for FY 2000-2001.

GENERAL PERFORMANCE INFORMATION:					
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00
Number of beds (adult)	Not available ¹	Not available ¹	Not available ¹	16	18
Average length of stay in days (adult)	Not available ¹	Not available ¹	Not available ¹	21	29
Percentage of positive responses on client satisfaction questionnaire	Not available ¹	Not available ¹	Not available ¹	Not available ²	99%
Occupancy rate (adult)	Not available ¹	Not available ¹	Not available ¹	90%	78% ³
Number of admissions	Not available ¹	Not available ¹	Not available ¹	18	189

¹ Program Started during FY 1998-1999.

⁴ The value shown for existing performance standard is an estimate of yearend performance, not a performance standard.

⁵ Recidivism rate is calculated by the number of readmissions divided by the number of admissions.

⁶ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

² No scientific data available.

³ Length of stay will increase due to findings indicating that this population will require more intense treatment.

8. (KEY) To enroll 7,419 individuals in its 41 Primary Drug Abuse Prevention Programs.

Strategic Link: This objective is identical to Goal II Objective II.1 in the revised Strategic Plan. Children's Cabinet Link: It relates to Prevention Education Programs at a total cost of \$3,287,831.

L			PE	RFORMANCE IN	DICATOR VALUE	ES	
E		YEAREND	ACTUAL	ACT 11	EXISTING	AT	AT
V		PERFORMANCE	YEAREND	PERFORMANCE	PERFORMANCE	CONTINUATION	RECOMMENDED
Е		STANDARD	PERFORMANCE	STANDARD	STANDARD	BUDGET LEVEL	BUDGET LEVEL
L	PERFORMANCE INDICATOR NAME	FY 1999-2000	FY 1999-2000	FY 2000-2001	FY 2000-2001	FY 2001-2002	FY 2001-2002
K	Number of persons enrolled	6,251	7,416	7,415	7,419	7,419	7,419 ⁵
K	Cost per participant served	\$407	\$420	\$359	\$359	\$420	\$420 ⁵
	Percentage of persons increasing positive attitude of non-drug use	Not applicable ¹	Not available ²	Not applicable ³	65% 4	65%	65% ⁵

¹ This performance indicator did not appear under Act 10 of 1999 and therefore has no performance standard for FY 1999-2000.

² This is a new performance indictor. No actual yearend data was collected for FY 1999-2000.

³ This performance indicator did not appear under Act 11 of 2000 and therefore has no performance standard for FY 2000-2001.

⁴ The target for implementation of this indicator is July 2001. The number provided is our best estimate at this point in time.

⁵ Figures in the Recommended Budget Level column reflect performance standards at a continuation level of funding. The Department of Health and Hospitals will, after sufficient time for analysis of the recommended budget, request an amendment to the Appropriations Bill to correct the performance standards.

GENI	ERAL PERFOR	MANCE INFO	RMATION:		
	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL
PERFORMANCE INDICATOR	FY 1995-96	FY 1996-97	FY 1997-98	FY 1998-99	FY 1999-00
Cost per participant served	Not available ¹	Not available ¹	\$397	\$359	\$420
Number of persons enrolled	Not available ¹	Not available ¹	3,908	7,415	7,416
Percentage of positive responses on client	Not available ¹	Not available ¹	Not available ¹	97%	95%
satisfaction questionnaire					
Target population for drug abuse prevention	3,872,015 ²	3,872,015 ²	3,872,015 ²	3,872,015 ²	3,872,015 ²
(La Population at risk)					

These figures were not captured until FY 1998.
 These figures are based upon the 1990 census figures.

RESOURCE ALLOCATION FOR THE PROGRAM

	ACTUAL 1999- 2000	ACT 11 2000 - 2001	EXISTING 2000 - 2001	CONTINUATION 2001 - 2002	RECOMMENDED 2001 - 2002	RECOMMENDED OVER/(UNDER) EXISTING
MEANS OF FINANCING:						
STATE GENERAL FUND (Direct) STATE GENERAL FUND BY:	\$13,393,659	\$13,615,328	\$13,615,328	\$14,044,957	\$17,014,650	\$3,399,322
Interagency Transfers	643,297	215,000	434,695	434,695	434,695	0
Fees & Self-gen. Revenues	318,001	318,000	318,000	318,000	318,000	0
Statutory Dedications	1,590,918	1,500,000	1,500,000	1,500,000	1,500,000	0
Interim Emergency Board	0	0	0	0	0	0
FEDERAL FUNDS	33,003,600	32,228,953	35,529,722	36,205,941	35,552,182	22,460
TOTAL MEANS OF FINANCING	\$48,949,475	\$47,877,281	\$51,397,745	\$52,503,593	\$54,819,527	\$3,421,782
EXPENDITURES & REQUEST:						
Salaries	\$13,026,353	\$12,814,679	\$12,814,679	\$13,184,048	\$12,572,728	(\$241,951)
Other Compensation	1,343,956	181,248	181,248	181,248	181,248	0
Related Benefits	2,439,670	2,116,401	2,116,401	2,186,580	2,325,615	209,214
Total Operating Expenses	2,947,777	2,760,977	2,760,977	2,988,169	2,827,611	66,634
Professional Services	1,025,473	1,228,048	1,228,048	1,263,391	1,228,048	0
Total Other Charges	27,883,156	28,548,928	32,069,392	32,507,858	35,491,978	3,422,586
Total Acq. & Major Repairs	283,090	227,000	227,000	192,299	192,299	(34,701)
TOTAL EXPENDITURES AND REQUEST	\$48,949,475	\$47,877,281	\$51,397,745	\$52,503,593	\$54,819,527	\$3,421,782
AUTHORIZED FULL-TIME						
EQUIVALENTS: Classified	467	444	444	444	424	(20)
Unclassified	2	2	2	2	2	0
TOTAL	469	446	446	446	426	(20)

SOURCE OF FUNDING

The Prevention and Treatment Program is funded from State General Fund, Fees and Self-generated Revenues, Statutory Dedications, and Federal Funds. Fees and Self-generated Revenues include: (1) fees from patients for services provided based on a sliding fee scale, (2) DWI fees paid for prevention and treatment services provided to DWI offenders, (3) reimbursement for meals provided to employees and visitors at inpatient treatment facilities, (4) and co-payments on urine drug screens. Statutory Dedications means of financing are available in accordance with Act 1215 of 1995 and Act 585 of 1997. Act 1215 established the Compulsive and Problem Gaming Fund. Act 585 increased the fund amounts to \$500,000 each from Lottery, River Boat Gambling and Video Poker (Per R.S. 39:32B.(8), see table below for a listing of expenditures out of each statutory dedication fund). Federal Funds include Title XVIII for services

provided to Medicare eligible patients, funds provided by the Bureau of Prisons, and the following grants: Office of Alcohol and Drug Abuse Block Grant, Needs Assessment grants, Shelter Plus grant, Women with Dependent Children grant, and Underage Drinking grant.

						RECOMMENDED
	ACTUAL	ACT 11	EXISTING	CONTINUATION	RECOMMENDED	OVER/(UNDER)
	1999 - 2000	2000 - 2001	2000 - 2001	2001 - 2002	2001 - 2002	EXISTING
Compulsive and Problem Gaming Fund	\$1,590,918	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$0

ANALYSIS OF RECOMMENDATION

GENERAL FUND	TOTAL	T.O.	DESCRIPTION
\$13,615,328	\$47,877,281	446	ACT 11 FISCAL YEAR 2000-2001
			BA-7 TRANSACTIONS:
\$0	\$294,040	0	Increase in Federal Funds grant to develop and implement a multifaceted statewide training program to enhance drug court treatment and documentation of drug court.
\$0	\$2,786,000	0	Increase in Federal Funds grant to assist in the development, promotion and implementation of a proven research based substance abuse prevention model.
\$0	\$219,695	0	Increase in Interagency Transfer to support the development and implementation of a statewide Tobacco Cessation Program.
\$0	\$220,729	0	·
\$13,615,328	\$51,397,745	446	EXISTING OPERATING BUDGET – December 15, 2000
\$65,279	\$217,598	0	Annualization of FY 2000-2001 Classified State Employees Merit Increase
\$66,585	\$221,950	0	Classified State Employees Merit Increases for FY 2001-2002
\$42,083	\$66,634	0	Risk Management Adjustment
\$192,299	\$192,299	0	Acquisitions & Major Repairs
(\$227,000)	(\$227,000)	0	Non-Recurring Acquisitions & Major Repairs
\$138,075	\$460,251	0	Salary Base Adjustment
(\$447,035)	(\$932,536)	(20)	Attrition Adjustment
(\$62,764)	(\$209,214)	0	Salary Funding from Other Line Items
\$3,631,800	\$3,631,800	0	Funding for the operation of 25 Drug Courts at existing level
\$17,014,650	\$54,819,527	426	TOTAL RECOMMENDED
\$0	\$0	0	LESS GOVERNOR'S SUPPLEMENTARY RECOMMENDATIONS
\$17,014,650	\$54,819,527	426	BASE EXECUTIVE BUDGET FISCAL YEAR 2001-2002
			00.251B

\$17,014,650	\$54,819,527	426	GRAND TOTAL RECOMMENDED
\$0	\$0	0	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE
\$0	\$0	0	SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE: None
\$0	\$0	0	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL
\$0	\$0	0	SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL: None

The total means of financing for this program is recommended at 106% of the existing operating budget. It represents 92% of the total request (\$59,780,685) for this program. The major changes reflected in the analysis of recommendation included: full funding has been provided for all 426 recommended positions and an adjustment to reflect an anticipated attrition factor of 4% totaling a decrease of \$932,536 (\$447,035 State General Fund and \$485,501 Federal Funds) and a reduction of 20 positions; salary funding from other line items decrease of \$209,214 (\$62,764 in State General Fund and \$146,450 in Federal Funds) deducted from other charges; an increase in Risk Management of \$42,083 in State General Funds; and an increase in Acquisitions and Major Repairs of \$192,299 in State General Fund. Funding to maintain operations of the 25 drug courts (14 adult and 11 juvenile) at existing capacity of \$3,631,800 in State General Fund.

PROFESSIONAL SERVICES

\$656,939	Physician Services Contracts - to provide medical services at a given facility to patients and provides medical consultation to staff of the specified facility. The medical services provided may vary from facility but primarily they include routine physicals of clients enrolled in the program.
\$277,906	Psychiatric Services - to patients of Alcohol and Drug Abuse Clinics. Also, provide formulation and authorization of Treatment plans, Medical Management and consultation to members of the staff of the clinics.
\$132,420	HIV Counseling and/or Testing Contracts - nurses and phlebotomists who assist staff with HIV/TB Counseling and Testing and phlebotomy services including Sexually Transmitted Disease (STD) education and Venereal Disease Research Laboratory for Syphilis (VDRLS). These providers will also do TB skin testing on IV drug users clients and HIV positive clients. The contract will provide direct observed therapy on-site when appropriate in collaboration with the Louisiana AIDS Program and TB Control Program.
\$10,920	Psychological Services - provide psychological testing, consultation and assessment on personality characteristics of alcohol and drug abuse clients. In selected cases, intelligence testing is used to determine optimum rehabilitation placement.
\$69,734	Interpreting Services - for hearing impaired clients. In compliance with the ADA Act of 1990, OAD is required to provide treatment services to physically impaired individuals and make available reasonable resources to facilitate a positive treatment outcome.
\$80,129	Other service contracts for dietitian, consulting, computer and software specialist, counselors, training and other non-medical services

\$1,228,048 TOTAL PROFESSIONAL SERVICES

OTHER CHARGES

- \$4,809,929 Outpatient treatment services (\$2,181,977 for regular outpatient treatment; \$411,000 for gambling outpatient treatment; \$2,216,952 for drug court outpatient treatment). Outpatient treatment services provides an array of services to addictive abusing individuals and their families at the community level that is least restrictive, less costly to access than formalized inpatient treatment services. These services are designed to bring the addictive process to remission and to support individual and family growth to sustain recovery. Standardized core services this component include: Individual, family, group and couples counseling; intensive day treatment, medical services, educational services, drug screens, case management, and aftercare services to both children/youth and adults statewide.
- \$326,525 Residential Inpatient Treatment services provide a therapeutic environment for citizens diagnosed with substance abuse disorders (chemical dependency, addiction, etc.), who due to the severity of the disorder, cannot achieve recovery in less restrictive environment. Services are provided to both adolescent and adults, including specialized programming to addicted pregnant women, women with dependent children. These services are either short-term (standard 28 day program) or long-term (3-6 months) for more chronic individuals.
- \$3,150,908 Regular Inpatient Treatment services provide for non-acute treatment and includes a planned and professionally implemented regime for people suffering from alcohol and/or other addiction problems. It operates 24 hours a day, seven days a week and provides medical and psychiatric care as warranted.
- \$492,750 Gambling Inpatient Treatment services provide for non-acute treatment to compulsive and problem gamblers. Treatment includes a planned and professionally implemented regime for people suffering from gambling addiction. An 18 bed program that operates 24 hours a day, seven days a week and provides medical and psychiatric care as warranted.
- \$854,518 Acute Care-Detox Treatment services provide non-medical supervised support services to persons undergoing detoxification after a prolonged period of alcohol and/or drug abuse where the forward motion of the addictive process can be halted and the individuals can begin the screening and assessment for the development of an appropriate treatment plan. Services included are aftercare planning and referrals to appropriate component in the continuum of care. Each program has a specific number of inpatient beds assigned based on population. Services provided during the inpatient stay may include, in addition to the supervision of the detoxification process, group, individual and family counseling, introduction to the participation in self-help groups, and other information meeting and referral groups. These contractual programs provide over 36,000 patient days per year.
- \$3,385,174 Prevention Services provides the most cost effective approach for achieving success in the war against drugs is to less the demand for the substance (\$3,229,874 education and \$155,300 decreasing access of tobacco products to minors, Synar). The aim of prevention contracts is to create a social environment in which substance abuse is unacceptable. Focus is on those at highest risk, which includes youth in high crime and drug abuse areas, school dropouts and those experiencing difficulty in school, parents of those children, young adults and pregnant women. This task can be accomplished by assembling the resources of all the citizens of this state in a sustained and well-organized effort to alter the attitudes and behavior that encourage substance abuse. Prevention contracts are required for awareness and education to the effects of alcohol, tobacco, and other drugs of abuse, within the youth and general population of the State of Louisiana.
- \$760,417 Shelter Plus Grant a unique partnership between two major collaborative efforts underway in the City of New Orleans: UNITY for the Homeless and the New Orleans Target Cities Project. By proposing Shelter Plus Care sponsor-based renewal assistance for the homeless substance abusing population, the project seeks to address in a comprehensive manner the continuum of care needs of a significant segment of the city's homeless population

- \$1,119,996 Underage Drinking Grants three grants receive from the U.S. Department of Justice to combat underage drinking through education and treatment.
- \$437,464 Drug Court MIS Training Grants two grants received from the U.S. Department of Justice for the development of a management information system, a drug court evaluation process, and a training curriculum for drug court personnel.
- \$808,234 Women with Dependent Children Grant (Fairview) funded by the Substance Abuse and Mental Health Services Administration to provide residential services for women and their dependent children. This is a demonstration grant in region three at the present time. The award is for five years.
- \$1,500,000 Statutory Dedication Gambling In accordance with R.S. 28:841, compulsive and problem gambling program shall include provision for a twenty-four hour, toll-free telephone services, operated by persons with knowledge of programs and services available to assist persons suffering from compulsive or problem behavior. Funds are also used for billboards posted through the State of Louisiana containing the toll-free telephone number and for use in various places where gambling activities are conducted, such as around video poker machines, racing tracks and charity bingo parlors.
- \$2,786,000 Louisiana New Connections Incentive Project Grant a federal grant that will assist in the development of a statewide plan based on a proven research based prevention model. The grant has the potential to eliminate duplication of prevention services and assist communities in building coalitions utilizing identified risk and protective factors. Ultimately, the grant will allow the state to achieve a truly integrated substance abuse prevention system based on scientific research and guided by a statewide comprehensive plan. Eighty-five percent of the grant funding will be utilized in the mini-grant process. The mini-grant awards will be used to fill gaps in services that will be provided by community based agencies. The three-year grant was award September 2000.
- \$219,695 Tobacco Cessation Program an Interagency Agreement with the Office of Public Health to develop and implement a statewide Tobacco Cessation Program as required in the Tobacco Settlement.
- \$1,186,837 Other Contracted Service Included in Other Contracted Services are SYNAR (Tobacco enforcement), blood work, Management Information Services contracts and HIV, Phlebotomy, Urine Screen, Conference Co-Sponsorship, Pass Through Grant Funds, Statewide Training and Employment contracts.
- \$2,611,379 Community Based (Halfway House) services provide a structured, community-based supportive living environment for both adult and adolescent males and females, after completing a formalized primary care treatment program. This component of care allows the client/patient an opportunity to continue to work toward recovery, as reflected by his/her individualized treatment plans; provides individuals and group counseling; 12 Steps AA/NA meetings and other self-help support group and personal growth services in a safe, drug-free setting that is supportive, and peer generated, while reintegrating into the community. The length of stay ranges from (2-6) months during which time the resident is either employed, seeking employment or enrolled in vocational/educational activities.
- \$394,165 Community Based (Therapeutic Community) treatment is a community-based program of highly structured environment designed to treat substance abusers who have demonstrated a pattern of recidivism need for long term residential treatment. It is a unique program in that it relies on the social environment to foster change in the client while promoting self-reliance and a positive self-image. In general, this program requires a minimum of 12 months duration.
- \$3,631,800 Funding to maintain operations of the 25 drug courts (14 adult and 11 juvenile) at the existing capacity. OAD applied for 22 federal grants for continued drug court funding. Only four courts were funded (one court received a training grant). The four federal grants are not sufficient to maintain the existing operations of the 25 drug courts. Governor Foster increased state funding for drug courts to replace the federal funds not obtained by OAD.

\$28,475,791 SUB-TOTAL OTHER CHARGES

Interagency Transfers:

\$1,195,518 \$5,774,084 \$11,960 \$33,700 \$925	Interagency Transfers: Commodities and Services Interagency Transfers: Transfers of Funds Interagency Transfers: Printing Interagency Transfers: Office Supplies Interagency Transfers: Medical Supplies
\$7,016,187	SUB-TOTAL INTERAGENCY TRANSFERS
35,491,978	TOTAL OTHER CHARGES

ACQUISITIONS AND MAJOR REPAIRS

\$192,299 Recommended level of funding for the replacement and repairs of obsolete, inoperable or damaged equipment and buildings

\$192,299 TOTAL ACQUISITIONS AND MAJOR REPAIRS